

## **Montana Nurses Association**

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Celebrating 100 Years in 2012!

∄USIN	LISS & LABOR
EXHIBIT NO	4
DATE	2-9-11
BILL NO.	SB243

## **Esteemed Legislators:**

I am a registered nurse speaking in support of SB 243, the balanced approach, and in opposition to HB 344 as this legislation would be devastating to injured workers like me. As a new grad RN, I love nursing and wish to remain in nursing, but this is a field that results in a great number of workplace injuries, which is why I want to share with you my story as an injured worker:

- I was injured on 10/11/10. I was prepping a patient's knee for a total knee replacement and subsequently my left shoulder was dislocated due to my patient's knee 'giving out' during the process.
- I was immediately seen in the Emergency Department. My shoulder was placed in a sling and the doctor excused me from work for 3 days. During this 3 day period I was scheduled to follow up with Occupational Health.
- I followed up with Occupational Health on 10/12/10. During this visit I had X-rays taken which were eventually negative for any findings. During my physical exam I had very limited range of motion and continued pain so I was placed on right arm duty only. I was also referred to physical therapy twice a week.
- On 10/14/10 I reported back to work only to learn that the department would not be able to accommodate my work restrictions.
- I was contacted by the case manager for the hospital and advised that I would be placed in a light duty position. I was advised that this position would be available for up to 90 calendar days or until I was released back to work (which ever occurred first).
- October 14<sup>th</sup>: I was placed in my light duty position.
- After 3 weeks of being in a sling, still experiencing limited range of motion and pain I was approved by work comp for an MRI and referred to orthopedics.
- November: The MRI showed positive findings of a torn labrum, partially torn rotator cuff, bruising of the humeral head and excess edema.
- I then followed up with orthopedics where I was given the diagnosis of multi-directional shoulder instability. I was also advised that I would not have to wear the shoulder sling. I was told that the months of physical therapy is the first choice for rehabilitation versus having surgery. Surgery is not advised because of my age (31 y/o), the fact that I could potentially lose more range of motion then what I originally had prior to my injury and that the surgery is only 60%-70% successful.
- I continued with physical therapy twice a week at their office and twice a day at home. I also continued seeing the occupational health doctor 1-2 times a month.
- January 11: After my 90 calendar days were up, I was still on right arm duty only. I was not able to return to work due to the hospital's policy and so I was placed on an inactive duty status.
- February: I was referred to orthopedics again and was essentially advised that it had only been 4 months since my initial date of injury. The orthopedic doctor stated that he would like to see me go through at least 2 more months of physical therapy and then he would look at surgical options. He stated he would like me to return to work and "see how things go." He stated that if my shoulder continued to hurt that it might be something that I would "just have to continue to deal with."
- As of today I am still on inactive duty with an occupational health follow up appointment tomorrow (2/9/11) to see if I am able to return back to work or if I will continue on inactive duty status.

As you can see, I am not trying to abuse the system. I am a hard-working RN who loves my job and got hurt in the line of duty while trying to provide quality healthcare. If the regressive HB 344 were to pass, I, because surgery doesn't make sound medical sense in my case, would have my case closed. This means that I would have to leave the nursing profession. SB 243 allows for me to continue rehabilitating from my injury in the most therapeutic manner possible. I urge you to do the right thing for Montana and for nurses. I urge you to pass SB 243.

Sincerely, Jolynn Hoff, RN